Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

CLAIMS AS FILED - PART I							SMALL ENTITY		OTHER THAN OR SMALL ENTITY		
	7.1. 01 111.0		(Column 1)		(Column 2)		TYPE [SMALL	EMTITY
TOTAL CLAIMS							RATE	FEE] ~ :	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			13 mir	nus 20=	*		X\$ 9=		OR	X\$18=	_
INDEPENDENT CLAIMS			2 minus 3 = *				X40=		OR	. X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=		OR	+270=	į.
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	TOTAL		OR	TOTAL	212
	С	LAIMS AS A	MENDED	**	3,	. T T.	OTHER	THAN			
		(Column 1)	(Column 2			(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Ţotal	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AINA	=	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
									OR	TOTAL ADDIT. FEE	
	•	ADDIT. FEE			ADDIT: TEE						
AMENDMENT B		CLAIMS HI		(Colur	EST	(Column 3)		ADDI-	1 1	<u> </u>	ADDI-
		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X40=	e na ent <u>a</u> ja	OR	, X80=	
	FIRST PRESE	JLTIPLE DEI	LTIPLE DEPENDENT								
+135=									OR	+270=	
									OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE
NON NON	Total	*	Minus	**		=	X\$ 9=		OR	. X\$18=	
AME	Independent	*	Minus	***		=	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 		
	If the entry in colu	mn 1 is less than t	he entry in col	umn 2. write	e "0" in co	lumn 3.	+135=		OR	+270=	
••	If the "Highest Nu	mber Previously P	aid For" IN TH	IS SPACE	is less tha	n 20, enter "20."	TOTAL ADDIT. FEE	a a series and a series of	OR	TOTAL ADDIT. FEE	THE STATE SHARES
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											